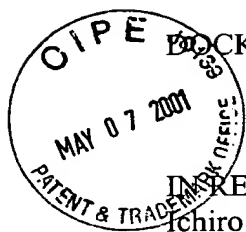


Receipt



PACKET NUMBER: 201220US2/sbj

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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IN RE APPLICATION OF:  
Ichiro OKAJIMA, et al.

: GROUP: 2661

SERIAL NUMBER: 09/748,258

: ATTENTION:  
Application Division  
Customer Corrections

FILED: December 27, 2000

FOR: PACKET HEADER STRUCTURE AND METHOD OF CONTROLLING PACKET  
TRANSFER

**RECEIVED**

**AUG 13 2001**

REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Technology Center 2600

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

The Patent Office is requested to provide a corrected Official Filing Receipt for the attached. If you have any questions, please do not hesitate to contact us.

No fees are required. However, in the event that a fee is required, please charge the appropriate amount to our Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/748,258	12/27/2000	2661	840	201220US2	12	12	2

CONFIRMATION NO. 4747

 22850  
 OBLON SPIVAK MCCLELLAND MAIER & NEUSTADT PC  
 FOURTH FLOOR  
 1755 JEFFERSON DAVIS HIGHWAY  
 ARLINGTON, VA 22202

## FILING RECEIPT



\*OC00000005751845\*

Date Mailed: 02/09/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

 Ichiro Okajima, Yokohama-shi, JAPAN;  
 Narumi Umeda, Yokohama-shi, JAPAN;

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AUG 13 2001

## Assignment For Published Patent Application

NTT DoCoMo, Inc., Tokyo, JAPAN;

Technology Center 2600

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## Continuing Data as Claimed by Applicant

## Foreign Applications

 OBLON, SPIVAK, McCLELLAND  
 MAIER & NEUSTADT P.C.

If Required, Foreign Filing License Granted 02/09/2001

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

## Title

Packet header structure and method of controlling packet transfer

Preliminary Class  
370

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Data entry by : LUENG, YIN

Team : OIPE

Date: 02/09/2001



PLEASE NOTE THAT THE FOREIGN APPLICATION INFORMATION WAS OMITTED. IT  
SHOULD READ AS FOLLOWS:

JAPAN

11-375801

12/28/1999



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Bib Data Sheet

CONFIRMATION NO. 4747

<b>SERIAL NUMBER</b> 09/748,258	<b>FILING DATE</b> 12/27/2000 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2662	<b>ATTORNEY DOCKET NO.</b> 201220US2	
<b>APPLICANTS</b> Ichiro Okajima, Yokohama-shi, JAPAN; Narumi Umeda, Yokohama-shi, JAPAN;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 11-375801 12/28/1999					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/09/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 22850					
<b>TITLE</b> Packet header structure and method of controlling packet transfer					
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		